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PATENT (U.S.A.) ATTORNEY'S DOCKET NO. 57A 3127

DECLARATION and POWER OF ATTORNEY

☑ ORIGINAL CONTINUATION DIVISIONAL As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: LITHOGRAPHIC METHOD USING ULTRA-FINE PROBE NEEDLE the specification of which is attached hereto unless the following box is checked: as United States Application Number or PCT International Application Number _ was filed on and was amended on My residence, post office address and citizenship are as stated below next to my name l acknowledge my duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: PRIOR FOREIGN APPLICATION(S) DATE OF FILING PRIORITY CLAIMED UNDER APPLICATION NUMBER Month Day Year 35 U.S.C. 119 COUNTRY January 22, 2000 ⊠ No 2000-50301 ☐ Yes Japan I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. (Application Serial No.) (Filing Date) (Status) POWER OF ATTORNEY: As a named Inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Tredemark Office connected therewith WILLIAM L. ANDROLIA, Reg. No. 27,177; H. HENRY KODA, Reg. No. 27,729. **DIRECT TELEPHONE CALLS TO: KODA & ANDROLIA** send correspondence to: KODA & ANDROLIA 310-277-1391 2029 Century Park East. Suite 3850 m Los Angeles, CA 90067-3024 (Please Print) Residence: CITY STATE or COUNTRY C Name of Inventor YOSHIKAZU NAKAYAMA Hirakata-city Japan CITIZENSHIP Post Office Address Japan 9-404, 14-2, Korigaoka 1-chome, Hirakata-city, Osaka 573-0084, Japan TU Residence: CITY STATE or COUNTRY Name of Inventor m Osaka Japan AKIO HARADA 12 CITIZENSHIP Post Office Address 14 Japan 7-19, Hanaten-nishi 2-chome, Joto-ku, Osaka-city, Osaka 536-0011, Japan STATE or COUNTRY Residence: CITY Name of Inventor 3 CITIZENSHIP Post Office Address Residence: CITY STATE or COUNTRY Name of Inventor CITIZENSHIP Post Office Address I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 2 SIGNATURE OF INVENTOR 1 DATE DATE SIGNATURE OF INVENTOR 4 SIGNATURE OF INVENTOR 3

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